

National Association of Midwives.

The Blackburn branch of the National Association of Midwives recently held their second annual tea and social gathering at the Co-operative Hall, when there was a large number of members present. Nurse Thompson, President of the local branch, congratulated the members upon the large attendance, pointing out that it was nearly double that of the previous year. The Association was, she said, though only four years old, making good progress throughout the country, and in a few years' time they hoped to be still more powerful and united. An interesting and varied programme was excellently rendered by Mrs. Ormrod, Miss E. Birtwistle, Miss Bentley, Mr. Doran, Mr. Booth, Mr. J. Ainsworth, Miss Whalley, and Master H. Whalley, and the dancing during the evening was spirited and enjoyable.

During the evening the President of the local branch, on behalf of the members present, presented the Secretary, Mrs. Lightboun, with a handsome mahogany writing-desk, and Mrs. Lightboun, to whom the gift came quite as a surprise, expressed her warm thanks in suitable terms.

West Somerset Midwives' Association.

A committee meeting of the above Association was recently held at 16, Elm Grove, Taunton, by invitation of Miss du Sautoy. The President was in the chair, and the following agenda was considered:—

1. Memo *re* Amending Midwives Bill, from Midwives' Institute. A resolution was passed strongly approving of the proposed alterations. Dr. Meredith, the President, signed it, and the Representative was asked to send it to the Secretary of the Midwives' Institute.

2. The question of affiliation with the Institute was considered; and it was agreed to pay the 5s. annual subscription and to have four dozen copies of *Nursing Notes* monthly at trade prices. The Hon. Secretary to send a copy to each member.

It was reported that Miss Meeson, who has acted as Hon. Secretary, is leaving the county and has to give up the secretaryship; her resignation was accepted with regret.

Miss Packard, Senior Queen's Nurse at Bridgewater, was appointed Hon. Secretary, and it was proposed that Miss Sewart be asked to be a second representative.

Miss du Sautoy reported that the Hon. Mrs. Stanley had consented to act as Vice-President for the ensuing year, and that Miss Eden had consented to serve on the Committee. The question was raised as to whether some form of amalgamation could be entered into with the Nurses' Social Union, and Miss Eden was asked to bring the matter before the next meeting of the Union.

The third annual report of the Southport Day Nursery, founded by Miss Mary Willett, shows that 3,830 babies were tended during the summer season, being an increase of almost 1,000 upon the previous season. Of these babies 225 came from Liverpool, 245 Wigan, and 151 St. Helens.

Difficult Labour.

Dr. G. E. Herman's book on "Difficult Labour," though primarily intended for students and medical practitioners, is well known to many midwives. In the new edition, which is published by Messrs. Cassell and Co., Ltd., the author has by the express wish of medical men added chapters on puerperal eclampsia and retroversion of the gravid uterus, which certainly add to the value of the volume, and may with advantage be studied by midwives.

RETROVERSION OF THE GRAVID UTERUS.

We read that the effect of retroversion, or turning backwards, of the gravid uterus, if uncorrected, is, as it increases in size, to prevent its rising, owing to its position in the pelvis. The retroverted uterus fills the antero-posterior diameter of the pelvis; the cervix presses the urethra upwards and forwards, and the fundus is in the concavity of the sacrum. "The pressure on the urethra causes retention of urine, and this is the effect which makes retroversion of the pregnant uterus important. When the uterus is held down in this way it is said to be incarcerated.

"Although the above is the usual way in which the pregnant uterus becomes incarcerated these are rare cases in which the incarceration is produced suddenly. When the bladder is full it lifts the uterus upwards and backwards. Now, if during the fourth month the patient goes a long time without emptying the bladder, and then makes some violent effort, involving use of the abdominal muscles, and the diaphragm, the pressure within the abdomen will be exerted through the full bladder upon the anterior surface of the uterus, and may drive the uterus down past the sacral promontory."

Dr. Herman reiterates that the sole importance of retroversion of the gravid uterus is that it sometimes causes retention of urine. Two apparently paradoxical statements may be made about it.

"Displacement is nothing, incarceration everything.

"The uterus is nothing, the bladder everything.

"Retroversion of the pregnant uterus without incarceration amounts to no more than a cause of slight discomfort, and usually rights itself as pregnancy advances, but when the uterus is incarcerated below the sacral promontory, it causes retention of urine, and becomes, if not properly treated, a cause of grave danger. The uterus is then held down not only by the sacral promontory, but by the full bladder. The morbid changes in, and arising from, the distended bladder, are the sole source of danger: the patient does not die from any change in the uterus."

PUERPERAL ECLAMPSIA.

There is much that is illuminating in this chapter, and it should be absorbed.

The author describes puerperal eclampsia as "one of the most terrifying complications of the first stage of labour," and defines it as "epileptiform convulsions coming on during pregnancy, labour, or childbed, and depending on disease of the kidney, which is peculiar to pregnancy.

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